

**Amendments to the Claims**

1. (Canceled)
2. (Original) A method for evaluating near-term suicidal risk by analysis of a series of spoken words, comprising the steps of:
  - a) converting the spoken series of words into a signal having discrete time varying amplitudes indicative of energy content of said words as spoken;
  - b) dynamically monitoring said signal to detect commencement of said words of said series and energy content thereof;
  - c) identifying the speaker has having a relatively high near-term risk of suicide if detected energy content of said words and frequency of commencement of said words are both lower, by predetermined amounts, than the occurrence of the same in the speech of individuals in good mental health having no near-term suicidal risk.
3. (Original) A method for evaluating near-term suicidal risk by analysis of a series of spoken words, comprising the steps of:
  - a) converting the spoken series of words into respective signals having time varying frequency;
  - b) monitoring said signals to measure time varying frequency at the commencement of respective ones thereof;
  - c) identifying the person as having relatively high near-term suicidal risk if measured time varying frequency at word commencement

varies by less than a predetermined amount than in the speech of individuals in good mental health having no near-term suicidal risk.

4. (Original) The method of claim 3 wherein said monitoring step includes:
  - a) monitoring said signals to measure time variations in fundamental frequency at the commencement of respective ones thereof;
  - b) and wherein said identifying step further comprises:
  - c) identifying the person has having relatively high near-term suicidal risk if measured word commencement time varying fundamental frequency varies less than a predetermined amount than in the speech of individuals in good mental health having no near-term suicidal risk.
5. (Original) A method for evaluating near-term suicidal risk by analysis of a series of spoken words, comprising the steps of:
  - a) converting the spoken series of words into a signal having time varying frequency;
  - b) dynamically monitoring said signal to measure time varying frequency thereof and computing an average value of the same;
  - c) identifying the person as having relatively high near-term suicidal risk if measured average time varying frequency of said signal is lower by a predetermined amount than in the speech of individuals in good mental health having no near-term suicidal risk.

6. (Original) A method for evaluating near-term suicidal risk by analysis of spoken words, comprising the steps of:
- a) converting the spoken words into a signal indicative of the syntactic structure thereof;
  - b) comparing the syntactic structure represented by said signal with known patterns of accepted syntax to identify whether some or all of the syntax of said spoken words fits a grammatically accepted pattern;
  - c) comparing initial amplitude of a spoken word identified as fitting said grammatically accepted pattern with amplitude(s) of preceding and succeeding contiguous words spoken by said person;
  - d) identifying the person as having a relatively high near-term risk of suicide if said initial amplitude of said spoken word exceeds amplitude of said preceding and/or succeeding contiguous words by more than a preselected amount based on speech of individuals in good mental health having no near-term suicidal risk.
7. (Previously presented) The method of claim 6 wherein said words constitute a series of spoken words.
8. (Previously presented) The method of claim 6 wherein said signal is an electrical signal.
9. (Canceled)
10. (Canceled)

11. (Canceled)

12. (Previously presented) The method of claim 2 further comprising the steps of :

- a) dynamically monitoring said signal to detect presence therein of parameters conventionally indicating anxiety in the speaker; and
- b) identifying the person as having a relatively high near-term risk of suicide in the absence of such parameters from such signal thereby indicating lack of speaker anxiety.

13. (Previously presented) The method of claim 4 further comprising the steps of :

- a) dynamically monitoring said signal to detect presence therein of parameters conventionally indicating anxiety in the speaker; and
- b) identifying the person as having a relatively high near-term risk of suicide in the absence of such parameters from such signal thereby indicating lack of speaker anxiety.

14. (Previously presented) The method of claim 6 further comprising the steps of :

- a) dynamically monitoring said signal to detect presence therein of parameters conventionally indicating anxiety in the speaker; and
- b) identifying the person as having a relatively high near-term risk of suicide in the absence of such parameters from such signal thereby indicating lack of speaker anxiety.

15. (Canceled)

16. (Previously presented) The method of claim 5 further comprising the steps of :

- a) dynamically monitoring said signal to detect presence therein of parameters conventionally indicating anxiety in the speaker; and
- b) identifying the person as having a relatively high near-term risk of suicide in the absence of such parameters from such signal thereby indicating lack of speaker anxiety.

17. (Canceled)

18. (Canceled)

19. (Previously presented) The method of claim 7 further comprising the steps of :

- a) dynamically monitoring said signal to detect presence therein of parameters conventionally indicating anxiety in the speaker; and
- b) identifying the person as having a relatively high near-term risk of suicide in the absence of such parameters from such signal thereby indicating lack of speaker anxiety.

20. (Previously presented) The method of claim 8 further comprising the steps of :

- a) dynamically monitoring said signal to detect presence therein of parameters conventionally indicating anxiety in the speaker; and

- b) identifying the person as having a relatively high near-term risk of suicide in the absence of such parameters from such signal thereby indicating lack of speaker anxiety.